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OF INTEREST TO CRIPPLED CHILDREN WORKERS

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Any publication or article listed in this Bulletin may be borrowed free of charge from the Bureau of Information of the National Society for Crippled Children. Bibliographies listing similar articles, or loan package libraries containing additional literature on any of the subjects discussed in these articles, will be sent to any interested person upon request.

Articles appearing in the bimonthly magazine, The Crippled Child, or in the monthly news letter of this Society, The Crippled Child Bulletin, are not listed in this Bulletin.

BULLETIN ON CURRENT LITERATURE

Prepared by Lillian Dowdell, Librarian

Issued monthly to affiliated state and local societies for crippled children, to state agencies engaged in the treatment, education or vocational rehabilitation of cripples, and to public or private institutions or agencies having Institutional Membership in the National Society for Crippled Children.

89. Altmeyer, A. J. Social insurance for permanently disabled workers. Social Security Bulletin, March 1941. Vol. 4, No. 3, pg. 3.

Mr. Altmeyer recommends that the Federal government establish a pension system for disabled workers in combination with the present old-age pension system. He suggests how this could be administered to fully cover all workers, without replacing, or duplicating the payments of, the present state workmen's compensation systems. He discusses the problems in administering disability insurance, such as determination of eligibility, amount of benefits, and benefits to dependents.

In connection with this pension system, he also recommends that a physical rehabilitation service be available to prevent, when possible, the workers from becoming fully disabled. Vocational rehabilitation services now operating in the states, according to Mr. Altmeyer, "should undoubtedly be available to incapacitated workers insured under the Federal social insurance program, and the cost of such training should be met by the insurance fund."

90. Boorstein, Samuel W., M.D. Flat feet at birth. Hygeia, May 1941. Vol. 19, No. 5, pg. 372.

"...Due to regular medical examinations, especially in schools, a great many cases of flat feet in children are being observed and reported. ... Since children of school age are too young to have postural flat feet, the cause must be sought elsewhere. There are some cases of flat feet due to knock-knees but the number is small. The only other explanation is that the deformities are congenital: the children were born with flat feet, but the condition was not recognized until the child began to walk and to attend school. ...

"Flat feet may be recognized by the following characteristics: The foot is longer than normal and is turned out, the heel cord is excessively long, the sole of the foot is flat and the toes can easily be brought upward to touch the shin bone, though the foot is not habitually held in this position. ...

"These children, if not treated, begin to walk very late and when they do walk, they flex the foot backward and bring their weight down forcibly on the heels. Later, they have a clumsy walk and turn the feet out. It is at this point that the condition is easily recognized by every one as flat feet. The best time to begin treatment is the same as in severe form of club foot: immediately after birth. ... Even mild deformities should be treated with strapping and exercises and many cases can be cured in four or six weeks if treated early. If untreated, they lead to delayed walking, imperfect or impaired walking, with all its concomitants. But above all, the child should be instructed to stand and walk properly; the feet should be held parallel, or they may be even slightly turned inward."

A few simple exercises for the child to perform are described. Two pictures show how the condition may be recognized in the young baby.

91. Cameron, W. H. Outstanding activities of 1940 and a keynote for 1941. National Safety News, April, 1941. (Reprints available from National Safety Council, 20 North Wacker Drive, Chicago, Illinois.)

The annual report of the Managing Director of the National Safety Council.

92. Cotton, Carol Blanche. A study of the reactions of spastic children to certain test situations. The Journal of Genetic Psychology, 1941. Vol. 58, pg. 27.

A rewritten portion of a dissertation presented for the degree of Doctor of Philosophy in the Department of Psychology, University of Chicago, 1939. The entire thesis is available for loan from the National Society for Crippled Children.

"In this study 26 spastic school children, matched with 26 physically normal school children by sex, chronological age, and estimated mental age, were given a series of tests in an attempt to discover, first, whether demonstrable behavior differences aside from the obvious physical disabilities existed between the two groups, and, second, to discover the significance of such differences if they existed. ...

"With one or two exceptions the spastic group differed demonstrably from the normal in three general respects: first, a wider range of individual differences in type of response within any one test situation, with bizarre or fantastic responses found only among the spastics; second, a greater tendency toward more concrete types of response, with less ability to shift toward the more abstract forms of behavior; and third, a greater tendency toward stereotyped responses no matter what the nature of the test situation."

"It was hoped that a series of test situations might be devised which would give rather definite indications of the mental processes of spastic children, while at the same time minimizing the effects of the motor involvement. This hope has apparently been realized to some extent. Amplification and refinement of some of the test situations of the study might well result in a mental test especially designed for spastic children."

93. Crowder, Farnsworth. The House of Magic. Hygeia, May 1941. Vol. 19, No. 5, pg. 386.

The story of the work for crippled children done by the Ancient Arabic Order of the Nobles of the Mystic Shrine, "which today operates 15 hospitals in the United States, Canada and Hawaii and has treated over 60,000 crippled children, not one of whom has been assessed one dime."

"Today, every Shriner pays, along with his annual dues, a two-dollar assessment for the support ... of fifteen hospitals... . There, more than 800 children are receiving ward treatment, and to these hospitals 1,000 more are coming regularly for clinical attention - all at an annual operating outlay of \$850,000."

The article describes the building and equipment of one of the hospitals, taken as a sample, and contains ten photographs illustrating the activities of the patients and of the staff at this hospital. Stories are told of the feats of rehabilitation accomplished by the surgery and other treatments provided, and also of the vast improvements made in the personality and social adjustment of many of the patients.

94. Dauer, C. C., M.D. Prevalence of poliomyelitis in the United States in 1940. Public Health Reports, April 25, 1941. Vol. 56, No. 17, pg. 875.

An article on the distribution, by state and region, of the 9770 reported cases of poliomyelitis in the United States in 1940. This number of cases is about 30 percent over the number in 1939. Several maps and tables are given, one showing the poliomyelitis case rates per 100,000 by States from 1935 to 1940, inclusive.

95. Davis, Dorland J., M.D.; Weber, Francis J., M.D.; and Arey, Margaret S., R.N. A clinical study of poliomyelitis in Charleston County, South Carolina, 1939. Public Health Reports, May 9, 1941. Vol. 56, No. 19, pg. 1007.

"A review of the convalescent progress of all known cases [1939] in Charleston County a year or more after onset of the illness indicates that 57.3 percent of the paralytic cases, or 65.2 percent of all reported cases including non-paralytic ones, have or probably will have nearly unlimited activity and will not be seriously handicapped in their ability to earn a living. Twenty-seven percent of the paralytic cases have limited activity; 5.7 percent are incapacitated; and 10 percent have died."

"These data are of economic and sociological importance. In this experience, 57.3 percent of all paralytic cases will probably not be seriously handicapped in their ability to earn a living, while those with a permanent residual paralysis (27 percent) will probably be able to earn their living in only a restricted number of ways. Those totally incapacitated, a relatively small group comprising 5.7 percent of all paralytic cases, will always be dependent, and 10 percent of the total have died."

96. Faulkes, W. F. A contribution to our emergency defense program. National Rehabilitation News, April, 1941. Vol. 6, No. 2, pg. 4.

"Careful analysis of the various and different operations involved in the complexity of the manufacture of defense equipment and supplies has disclosed that there are many manipulative processes that do not require all of the physical capabilities of the average physically normal person. Consequently, there will be many citizens who are not capable of being inducted into the first lines of defense because of physical defects, but who may be prepared to do an active and constructive service in the industries and other facilities for the promotion of the defense activities.

"A late report from the Bureau of Labor Statistics of the U. S. Government indicates that in the year 1939 over 1,600,000 workers were injured in course of their employment. ...The accession of many new workers into these [National defense] fields of production and the increased speed, which will be necessary in order to bring about such production in time to be made effective, will undoubtedly increase the incidence of accidents among such workers. It consequently follows that ... all temporary and permanent disabilities resulting from such maximum activity should be given immediate attention and such disabled persons readjusted so as to again participate in the program for defense.

"...readjustment of disabled workers can be brought about without any extensive training program. It is recognized, however, in cases where the injured employee has little, if any, work experience which includes useable skills, a training program of from three to six months may be required in order to prepare this person to perform satisfactorily in such work as may be included under the National defense program.

"Another large and important group of physically handicapped persons whose services may be utilized to advantage in the defense program includes those severely physically handicapped workers who cannot serve as employees in the regular defense industries. Such disabled employees may work advantageously in a sheltered environment and contribute very materially to many types of supplies and equipment which will be used in the defense program. ...

"At the present time all of the forty-eight states are engaged in vocational rehabilitation services for the benefit of disabled persons who can be

readjusted to satisfactory employment. Statistics indicate that from 50,000 to 75,000 persons have been injured annually to such an extent that it has not been possible for them to return to their previous employment in the same capacity as was performed by them previous to their injury. Funds to date have not been adequate to care for this large number, and as a result many have made faulty readjustments themselves or have reverted to relief.

"In the program proposed for the National defense program, it can be reasonably expected that such numbers will approximate 100,000 annually and it should be the obligation of the Federal government and the states to see that the large majority of such injured persons are vocationally readjusted so as to be returned to production employment in the defense program. A careful estimate of cost of such readjustment would approximate \$500.00 per case per annum. The rehabilitation of 50,000 to 75,000 physically handicapped persons each year, so that there may be the minimum amount of interruption for defense program, would require at least \$25,000,000 appropriation from the Federal government.

"The legislation which has been proposed to Congress at this time suggests that such funds be appropriated by the Federal government to the states on the basis of need as may be determined through the number and types of disabled workers needing vocational readjustment. ..."

97. Frankel, Emil. Problems in the vocational adjustment of the orthopedically handicapped. Children's Institutions, May 1941. Vol. 1, No. 10, pg. 6.

A radio address, presented in connection with the 1941 Convention of the National Vocational Guidance Association, which discusses the vocational problems of the orthopedically handicapped in a generalized way for the benefit of the layman who has not studied the problem.

Mr. Frankel answers such questions as: "What are the essential requirements in the vocational training program of the orthopedically handicapped children and youths?" "What has been industry's experience in the employment of the physically handicapped?" and "What are problems in placing the handicapped in employment."

"Experience has shown that, generally speaking, commerce and industry can absorb the physically handicapped at all levels of employability without appreciable interference with the rate of production in the industrial organization, provided those handicapped persons have had adequate preparation and have developed proper attitudes toward their handicaps and work, and provided there is a favorable attitude on the part of commerce, industry, and the public. ..."

98. Heiss, Merton S. The story of Warm Springs. The Kiwanis Magazine, May 1941. Vol. 26, No. 5, pg. 216.

99. Hudson, Holland and van Gelder, Rosetta. Counseling the Handicapped - A Manual on Aptitudes: Their Discovery and Interpretation. National Tuberculosis Association, 1790 Broadway, New York City. 1940. 55 pp. 50¢.

As its title signifies, this is a handbook for the use of trained counselors in the vocational guidance of the physically handicapped. It lists various vocational aptitude, social adjustment, and mental tests; gives instructions for administering and judging such tests; and uses sample case records to show how the information from these tests can be combined with medical, social and personality data to help in guiding the counselee. "

100. Kearney, Paul W. Save fingers for defense. The Rotarian, June 1941. Vol. 58, No. 6, pg. 31.

"In 1940 the cost of nonfatal occupational injuries in the United States approximated 600 million dollars - more than enough to train, house, clothe, feed, and pay the 1941 draft army. These disabling accidents put the equivalent of 30,000 workers off the job for 30 days!"

Statistics similar to these, emphasizing the importance of further accident prevention in industry, are scattered throughout this article. New accident-prevention equipment and safeguards employed by large industries are described, as well as various effective safety education projects - community safety drives, interdepartmental safety contests in factories, safety schools for foremen.

Throughout the article, Mr. Kearney points out that "The crux of the whole matter is the development of a safety consciousness. It must reach from the chairman of the board to the most scatter-brained messenger boy. It must permeate the town." He also points out that in industry, especially in large factories, more has already been accomplished in accident prevention than in the home or on the farm, because this safety consciousness has a start, at least, in the factory.

101. Lumsden, L. L., M.D. "Sporadic" poliomyelitis. Public Health Reports, May 9, 1941. Vol. 56, No. 19, pg. 992.

A study on the cases reported to the Tennessee State Department of Public Health as poliomyelitis in 1939. Data is given on each of 34 such cases, and the author reaches the conclusion that: "Intensive and extensive systematic studies of 'sporadic' poliomyelitis situations as well as of localized outbreaks and of widespread epidemics of the disease would be of epidemiological value and a definite program of such studies should be formulated and carried out by State, Federal, and other centralized public health agencies. Such studies would be likely to reveal a considerable proportion of erroneous diagnoses, especially in nonepidemic seasons."

102. Mills, Alden B. Occupational therapists - a national study of salaries. The Modern Hospital, May 1941. Vol. 56, No. 5, pg. 61.

103. Mills, Martin, M.D. Lay participation in a crippled children's program. Monthly Bulletin, California Society for Crippled Children, May 1941. Vol. 4, No. 3, pg. 1

In this article, the Chief of Crippled Children Services of the State of California explains why "the continued support and interest of the lay person is absolutely essential to the successful operation of a broad, flexible and satisfactory program for crippled children."

104. Phelps, Winthrop Morgan, M.D. Factors influencing the treatment of cerebral palsy. The Physiotherapy Review, May-June 1941. Vol. 21, No. 3, pg. 136.

Explains how surgery, drug therapy and apparatus may be used in cerebral palsy, and lists physical therapy, occupational therapy, special schooling and speech training as important methods of treatment. Shows that the individual case determines the selection and use of the methods of treatment, and that the treatment accomplishes more if it is applied with some definite improvement in function or appearance as the aim, rather than just to make the child better in a general way.

Dr. Phelps states that "the spastic has a definite type of personality which may be modified by various environmental influences and inheritances, but which, nevertheless, is typical," and points out some "very definite fundamental psychological differences" between the cerebral palsied and the normal, and also between the spastic and the athetoid types of the cerebral palsied.

He explains that "the cerebral palsy field is one which includes sensory handicaps which are equally as important as the motor ones," and shows how these sensory handicaps may lead to a false impression of the child's deficiencies and to a misunderstanding of his actions. "Thus, cerebral palsy represents sensory handicaps involving sight, hearing and sensation, as well as motor handicaps of the arms, legs, speech and appearance. All of these must be carefully evaluated before subjecting the child to either an intelligence test or a determination of his potential abilities."

105. Thomas, Robert E. Vocational rehabilitation during 1939-40; a statistical analysis. National Rehabilitation News, April, 1941. Vol. 6, No. 2, pg. 16.

"During 1939-40 the number of rehabilitations increased from 10,747 to 11,890, a gain of 10.6 per cent from the preceding year. The increase during the past decade has been as follows:

1931.....5,184	1936.....10,338
1932.....5,592	1937.....11,091
1933.....5,613	1938.....9,884
1934.....5,062	1939.....10,747
1935.....9,422	1940.....11,890

"...Total expenditures were \$4,107,805, an increase of \$116,141 over 1939 and \$245,642 over 1938. The average cost per rehabilitated case was \$345, compared with \$371 in 1939 and \$392 in 1938. ...

"The percentage of rehabilitants given training has been steadily rising. Starting with 50.0 per cent in 1934, the percentage increased to 55.7 in 1936, 65.9 in 1938, 71.7 in 1939, and 75.7 in 1940. Increased training accompanied a continuing emphasis on younger and better educated young men and women, rather than on older men injured in industry. ...

"On June 30 the states reported a total of 47,174 live-roll cases, an increase of 1 per cent over the number reported at the end of 1939. ...

"All indications are that the number of rehabilitations in 1941 will be considerably larger than in 1940. ... Several states are now finding it difficult to take full advantage of the increasing opportunities for employment because of staff shortages arising from rehabilitation agents being transferred to the training program in the vocational schools or being called to action as reserve officers. ..."

106. Winterstein, W. A. School by telephone - The electrical two-way teaching device for crippled children in Iowa. The Child, April 1941. Vol. 5, No. 10, pg. 250.

In September 1939, the Iowa Department of Public Instruction started an experiment in adapting ordinary commercial intercommunication instruments to classroom instruction, and by now this program has so grown that over 100 sets are in use in various Iowa school districts.

"Placed in the child's room is a box-like instrument resembling a small radio set. On the teacher's desk at school is another matched to it. The child hears everything that goes on in the classroom, and he also recites when called upon. ...

"The Department does not recommend the use of the plan before a child has had sufficient classroom experience to interpret clearly the classroom instruction and discussion as it is heard over the teaching device. It would seem, too, to be necessary that the child should be sufficiently mature mentally to visualize classroom procedure. Where such experience and maturity concur and where the attending physician and the school superintendent in charge join in recommending an instructional program, the Department unhesitatingly recommends the use of the electrical two-way teaching device wherever classroom attendance is impracticable. ...

"Distance between classroom and home varies, of course, with the circumstances. Some homes served are in the next block to the schoolhouse grounds. The longest distance for such service we have yet encountered is a trifle more than 5 miles.

"The cost of equipment, adjustments, and installation has been approximately \$40 per pupil served. As additional pupils are served by the equipment already purchased, the average will decrease. Maintenance and operating costs are comparatively low. The leased pair of wires between classroom and home cost the school district \$1.25 per month for the first quarter mile and \$0.75 per month for each additional quarter mile. ...

"Standard equipment consists of a master station using power and a substation, both equipped with the necessary transformers for satisfactory use over a pair of continuous wires of required length. If more than one classroom is wired, the school wires should be brought to a conveniently located junction box where they can be distributed and redistributed, as the need may arise. ... It is recommended that the seller of the equipment be required to make installation, as some costly mistakes have been made in local attempts at installation."

107. Workmen's Compensation Laws. Official Bulletin No. 212, American Hospital Association, 18 E. Division St., Chicago, Illinois. 1941. 23 pp.

A booklet prepared by the American Hospital Association's Committee on Workmen's Compensation Laws to guide state and local hospital associations in securing legislation adequately recognizing the needs and rights of hospitals in the handling of compensation cases.

Periodicals

- The Child, Govt. Printing Office, Washington, D.C. Monthly. \$1 year; 10¢ copy.
Children's Institutions, 152 W. 42nd St., New York. Monthly. \$3 year.
Hygeia, 535 N. Dearborn St., Chicago. Monthly. \$2.50 year; 25¢ copy.
Journal of Genetic Psychology, Provincetown, Mass. Quarterly. \$14 year.
The Kiwanis Magazine, 520 N. Michigan Ave., Chicago. Monthly. \$1.50 year.
The Modern Hospital, 919 N. Michigan Ave., Chicago. Monthly. \$3 year; 35¢ copy.
Monthly Bulletin, California Society for Crippled Children, 251 Kearny Street, San Francisco, Calif. Monthly. (Mimeographed.)
National Rehabilitation News, 600 S. Michigan Ave., Room 708, Chicago. Bimonthly. \$1 year; 15¢ copy.
National Safety News, National Safety Council, 20 N. Wacker Drive, Chicago, Ill. Monthly.
Public Health Reports, Govt. Printing Office, Washington, D.C. Weekly. \$2.50 year; 5¢ copy.
The Rotarian, Rotary International, 35 E. Wacker Drive, Chicago. Monthly. \$1.50 year; 25¢ copy.
Social Security Bulletin, Govt. Printing Office, Washington, D.C. Monthly. \$2 year; 20¢ copy.